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**Perspectives of Same-Sex Sexualities and Self-Harm Among Service Providers
and Teachers in Hong Kong**

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Abstract

This research investigates the perspectives of service providers working with Chinese lesbian, gay and bisexual (LGB) youth in Hong Kong secondary schools, and maps the relations among same-sex sexualities, religion, education and self-harm. Sixteen service providers, including secondary school teachers, social workers based on and off school sites, and lesbian/transgender activists working in non-governmental organisations serving the lesbian, gay, bisexual and transgender communities, were subjected to in-depth interviews using a qualitative approach. In addition, extensive participant observation was carried out as part of fieldwork. A grounded theory approach was adopted to code the data, as themes emerged with each successive round of coding. The research findings highlight four main themes: obstructive barriers to discussing sexuality at school; the effects of personal disinclination and religion; lesbian and gay youth being perceived as especially susceptible to self-harm; and the similarities in perceptions of self-harmers and LGB youth. The findings suggest that conservative religious beliefs at both the personal and structural levels act as a deterrent to providing counselling and mental health services that are supportive of LBG youth in Hong Kong.

Keywords: Sexual minority youth; service providers; attitudes; religion; Hong Kong;

Introduction

Research on the topic of sexuality and self-harm has grown steadily over the past decade. As young people begin to come out as lesbian, gay or bisexual (LGB) at an earlier age, they face the varied responses of peers, parents and school authorities to their sexuality both inside and outside the school setting. These responses run the spectrum from affirmation to hostility. This study investigated the perspectives of service providers who work with Chinese LGB youth in secondary schools, and mapped the contested relations between same-sex sexualities, religion, education and self-harm. The service providers under study included secondary school teachers, on- and off-site social workers, and lesbian/transgender activists working in non-governmental organisations (NGOs) serving the lesbian, gay, bisexual and transgender (LBGT) communities. Qualitative data were also collected through in-depth interviews with 16 service providers working with LGB youth aged 13–18 years and enrolled Hong Kong secondary schools and by extensive participant observation at youth programs using the ethnographic approach.

Research Background

Since Hong Kong's decriminalisation of male homosexuality under the Crimes (Amendment) Ordinance in 1991, the issue of sexual orientation has regularly made headlines and generated heated debate amongst community activists, lawmakers, progressive liberals and conservative religious groups. In November 2012, the Legislative Council struck down a motion to launch a public consultation on a proposed Sexual Orientation Discrimination Ordinance. An earlier version entitled the Equal Opportunity Bill, proposed during the 1994–1995 legislative session, was also voted down for being overly ambitious in terms of the grounds for discrimination, which encompassed sex, family status, disability, race, ethnicity and sexual

orientation. Conservative Protestant Christian and Catholic organisations with an anti-gay position such as The Society for Truth and Light and the Hong Kong Alliance for Family garnered considerable public attention through extensive media campaigns highlighting the dangers of reverse discrimination if legislation were passed to protect sexual minorities against social discrimination (Kong 2011; Tang 2011; Yau 2010; Wong 2007). Religion has gradually become an opposing factor to the advancement of equal rights for LGBT individuals in Hong Kong. Rather than referring to family values, lawmakers have consistently used religious beliefs as a key factor in arguing against anti-discrimination proposals.

Hong Kong's education system largely continued to follow British colonial tradition after the handover to mainland China in 1997. As is common in many postcolonial societies, schools with Catholic and Protestant missionary backgrounds are abundant owing to the close relations between government and church authorities (Cheng 2004; Tan 1997). Government statistics show that approximately 50% of all secondary schools in Hong Kong belong to a religious organisation (Hong Kong SAR Government 2012). Most health clinics, social service organisations, and youth and family community centres are also run by church groups, thereby rendering positive discussion of same-sex sexualities non-existent or marginal, with reparative action even being recommended in worst-case scenarios. Service providers and school teachers who work in both conservative religious organisations and schools must adhere to strict guidelines or unspoken regulations when bringing the issue of sexuality into the classroom, regardless of their personal opinions. This study was thus situated against a backdrop of intense public debate over the recognition of LGBT sexualities, with the government, LGBT NGOs, and churches and schools affiliated with conservative religious organisations all weighing in.

LGB Mental Health and Social Support

The LGB population worldwide is largely neglected or under-served by healthcare providers (Sanchez et al. 2006; Rondahl 2009), with studies showing that LGB persons poorer fewer healthcare services than heterosexuals and being less likely to seek medical help owing to stereotyping and discrimination (King et al. 2003). Lack of professional training on the specific needs of LGB persons is also well-documented (Travers et al. 2010). Kan et al. (2009) recently reported that more than 25% of medical students at the University of Hong Kong responded positively to the statement: 'Homosexuality is a psychological disorder that requires therapy.' In a later study, data collected from 462 Chinese social work students at three Hong Kong universities showed students with Christian beliefs to generally hold negative attitudes towards lesbians and gays (Kwok et al. 2013). It could be argued that the high prevalence of psychological distress, substance use, suicide and self-harm behaviour documented amongst LGB persons is at least in part the result of this historical medical neglect and stigmatisation (Darwich et al. 2012; Hatzenbuehler and Keyes 2013; McDermott et al. 2008).

The Notion of Self Harm: Clinical and Sociological Meanings

There are two distinct theoretical approaches to understanding the notion of self-harm. Sociological inquiries to self-harm behaviour are rare, with clinical approaches often taking precedence. Clinical studies commonly focus on hospital populations, including emergency intakes and short-term admissions of self-injurers. An early construction of the 'typical self-injurer' that appeared in the clinical psychiatric literature in the 1960s (Brickman 2004) – white, female, young and middle-class – has since become popularly accepted by clinicians. Being female is perceived to be a significant contributing factor in self-harm, leading to a lack of

understanding of male self-injury (Hawton et al. 2002; Brunner et al. 2007; Gratz and Chapman 2007; Kirkcaldy et al. 2006; Shek and Yu 2012). This stress on the female self-cutter has also left structural analysis of other variables such as socioeconomic background and cultural factors largely unexamined (Adler and Adler 2007). In a rare study applying a sociological approach, Platt et al. (2005) highlight the role of socioeconomic factors, including social exclusion and socioeconomic deprivation, affecting the incidence of self-harm. Adler and Adler (2007, 539) define self-injury as ‘a complex process of symbolic interaction rather than as a medical problem’, and explore the wider social and individual factors that lead to it, whilst Chandler et al. (2011) question the individualistic focus dominant in the self-harming literature, urging researchers to take into account the social context in which self-injury takes place. In this study, I adopted the definition of self-harm posited by Chandler et al. (2011, 99) as the ‘intentional injury to the outside of the body, mainly through cutting, but including scratching, burning, biting or hitting’.

Hong Kong Youth and Self-Harm

Whilst there is a considerable body of research on deliberate self-harm (DSH) and suicide amongst young people in Western countries, research data on Chinese adolescents are scarce (Shek and Yu 2012). As established authorities in the field of suicide prevention and DSH, Yip and Yang (2004) published a seminal report entitled *Deliberate Self-harm in Hong Kong SAR (1997-2003)*, which reported the number of affected girls to be twice that of boys in 1997, but near parity to have been reached by 2003. In a study of suicidality amongst Hong Kong high school students, Yip et al. (2004) contended that gender is not a significant factor in determining the intention to engage in suicidal behaviour in this population. These studies thus suggest that being female does not necessarily pose a consistently higher risk of DSH and suicide

ideation in Hong Kong, despite earlier findings suggesting otherwise. In a review of perspectives on adolescent self-cutting employing a multi-dimensional approach, Yip (2005) identified peer and parental influences as the major factors in a young person's involvement in such behaviour. He argued that a better social environment and measures to enhance young people's self-integrity and dignity are key to self-cutting prevention (Yip 2005).

The issue of self-harm and suicidal behaviour among young people in Hong Kong resurfaced as a significant topic in 2009, when a large-scale empirical study with data collected from 3328 secondary school students in 28 schools (Shek and Yu 2012). The participating students, who had a mean age of 12.59 years, answered questions concerning self-harm and suicidal behaviour. Nearly a third (32.7%) admitted to at least one form of DSH behaviour in the past year, with 10.4% reporting having 'severely scratch[ed] [themselves] to the extent that scarring or bleeding occurred' and 8.3% having 'cut [their] wrist, arms, or other areas of [the] body' (Shek and Yu 2012, 6). Shek and Yu (2012) also identified three protective factors against DSH and suicidal behaviour amongst Chinese adolescents: good academic performance, a healthy family environment, and positive youth development. In contrast to the earlier study by Yip et al. (2004), Shek and Yu recognised being female and having remarried parents as risk factors to display DSH behaviour.

Although sexual activity was often used as a measure in these Hong Kong studies, same-sex sexuality were not considered. To date, there has been very little research in Hong Kong on the subject of minority sexuality in association with suicide and suicide prevention. One aim of the present study therefore was thus to fill this gap by first discussing the issue of sexuality, particularly same-sex sexuality, with informants who provide education and services to LGB youth and then to investigate its relation to self-harm.

LGB Youth and Self-harm

Numerous studies show LGB youth to have higher rates of self-harm than their heterosexual counterparts (Haas et al. 2011; McDermott et al. 2008; Rivers and Cowie 2006; Whittle et al. 2007). Assertions of individuality are common amongst young people (D'Augelli et al. 2008; Gilchrist and Sullivan 2006; Rosario et al. 1996; Saewyc et al. 2008; Travers et al. 2010). There is also evidence to show that young people are more likely to engage in self-harming behaviour or attempt suicide if they are struggling with issues of gender identity and sexuality (Haas et al. 2011). The process of coming out for LGB youth often involves such negative outcomes as bullying and sexual harassment, which can result in anxiety, depression, isolation, suicidal feelings and alcohol/substance use (Almeida et al. 2009; The Boys' & Girls' Clubs Association of Hong Kong 2009; Hershberger and D'Augelli 1995; Kosciw 2004; Marshal et al. 2008, 2011; Remafedi et al. 1998; Westefeld et al. 2001). LGB youth who experience bullying are reported to be more prone to self-destructive behaviour than their heterosexual peers (Rivers 2000; Rivers and Cowie 2006).

LGB Youth in Schools

Schools are regulatory spaces in which young people's sexualities, erotic desires, moral values and pleasures are constantly regulated and resisted (Foucault 1979). School authorities can punish 'deviant' sexual identification and gender expressions by regulating students' appearance and non-conforming behaviour through regulations, the withdrawal of extracurricular activities, and student group, parental meeting and counselling interventions (Hong Kong Christian Institute et al. 2006). Case studies from *Equal Rights for LGBT People: Hong Kong Report* highlights the issues that LGB young people face in coming out to their peers and teachers, including

harrassment, violence, risks to personal safety and a lack of social support (Hong Kong Christian Institute et al. 2006). Tang (2011) reported secondary school students who identify as lesbians to experience rejection, name-calling, sexual harassment and isolation from peers. A 2009 online survey conducted by the Touch Project of the Boys' & Girls' Clubs Association of Hong Kong revealed that 53.1% of the 492 respondents who had come out to their classmates as *tongzhi*¹ experienced various degrees of exclusion and isolation. A substantial proportion (42.3%) of respondents, who were in secondary school or had graduated no more than three years previously, reported suffering slander, insults, and/or the spread of malicious gossip, with 39.8% having withdrawn from social activities.

The literature on sexual discrimination amongst LGB youth shows that emotional support from school authorities and school policies aimed at preventing LGB bullying and harassment can deter gender violence, sexual harassment and LGB bullying (Hatzenbuehler and Keyes 2013; Walls, Freedenthal and Wisneski 2008). Such interventions are effective, however, only if outreach workers, social workers (whether school-based or off-site) and teachers develop sensitivity towards and awareness of LGB issues. Lack of training and professional support has been cited as a reason for service providers' feelings of ineptitude in handling cases involving self-harm and LGB sexualities (Logie et al. 2007; Rondahl 2009; Travers et al. 2010). The limited research on these issues also inhibits school-based providers' access to knowledge on how to identify and understand youth sexuality (Haas et al. 2011). Negative views of self-harm as a manipulative act, a form of deviant play or attention-seeking behaviour, are also prevalent amongst service providers and teachers (McDougall, Armstrong and Trainor 2010; Nehls 1999; Spandler 2001).

¹ *Tongzhi* is a politicised term commonly used in Hong Kong to signify a person with same-sex desires (Kong 2011).

The foregoing literature review formed the basis for the research questions in this study: 1) What institutional and personal factors influence service providers in offering guidance and counselling services to youth with same-sex desires? 2) What are the perceived links between same-sex sexualities and self-harm? 3) What is the impact of different perceptions of self-harm and sexuality amongst educators and social workers?

Research Methodology

Snowball Sampling and Recruitment

This study was qualitative by design, and used ethnographic methods to collect data. A non-probability snowball sampling method was employed owing to the study's sensitive nature. The methods of recruitment included: referrals from NGOs serving the LGB community and mainstream social service organisations offering family and youth programmes; postings on Internet sites and mobile phone applications targeting the LGB community; and snowball sampling during fieldwork. As previously noted, most Hong Kong studies of deliberate self-harm and suicidal behaviour in youth used quantitative methods, with some researchers issuing a call for more qualitative research (Jeffery & Warm 2002; Scourfield et al. 2008). In answer to that call, the current research involved in-depth interviews with 16 teachers, social workers and service providers in various institutional settings and community-based organisations. The data collection period was June 2012 to April 2013.

Characteristics of Study Participants

The interview participants were selected based on their experience of working with sexual minority youth, and all signed a consent form. With one exception, all interviewees identified as female, and they ranged in age from 25–45 years, and had

between four and twenty-two years of work experience. Three participants identified as queer, two as bisexual and one as lesbian. Seven participants were social workers, either school-based or working off-site in youth centres, six were teachers and three were community workers. All of the participants had a university degree, with five holding a Master's qualification. Seven participants identified as Christians, and four as spiritual in believing a higher being but not involved in organized religious groups. The other five stated no religious preference.

Interview Domains and Data Analysis

The interview questions were open-ended and covered such topics as youth culture, self-harm, suicide, gender identity, sexuality, educational policies, counselling strategies and coping mechanisms. The interviews were conducted in Cantonese and tape-recorded with participants' consent. Pseudonyms are used herein to ensure confidentiality. A grounded theory approach was used to code the data, with themes emerging during each round of coding and data continuously compared to inform the next round of interviews (Strauss and Corbin 1990). In-depth qualitative interviewing is well-suited to the employment of grounded theory as an analytic strategy (Charmaz 2002). As the principal researcher, I performed the initial coding of data into themes with the assistance of a research assistant. Comparisons of emergent themes were conducted at the secondary level of analysis to ensure that new themes were taken into account and to avoid simplifying themes. Follow-up interviews were conducted to clarify any data ambiguities. In addition to interviews, participant observation was carried out at events catering to LGB youth and their supporters, including cultural productions such as theatre performances and exhibitions and such activist-driven events as protests and pride parades.

Findings

All of the interview participants mentioned difficulties in discussing sexuality, whether hetero- or homosexuality, owing to resistance from school authorities and the religious doctrines adopted by most secondary schools. These difficulties were personal for some of the participants, as they also had to struggle with their own religious beliefs concerning homosexuality. Those with Christian beliefs said they often had to strategise in offering counselling interventions that did not run contrary to their religion when faced with students who identified as gay or lesbian. The following discussion of the interview findings is divided into four main themes that emerged during data analysis: obstructive barriers to discussing sexuality in schools, personal disinclination and religion, lesbians and gays perceived as susceptible to self-harm, and similarities in perceptions of self-harmers and LGB youth.

Barriers to Discussing Sexuality in Schools

When I asked the informants whether the school authorities or Education Bureau provides guidelines on classroom discussions of sexual orientation, most said there were 'no explicit guidelines' or 'it depends on personal choice'.ⁱ The secondary school teachers in non-religious educational institutions repeatedly stated that they felt they had greater freedom in being able to tackle dating- and relationship-related issues involving non-conforming sexualities relative to their counterparts in religion-affiliated schools. One informant, 40-year-old Karen, discussed her experience of teaching sex education in schools with Protestant and Catholic backgrounds. A programme manager in a mainstream social service organisation at the time of the interview, Karen had begun her career as an outreach worker 14 years prior to taking up her current management position five years previously. She used to be a devout Christian, but had slowly grown less interested in church activities. Karen

described her attempt to discuss sexualities in the classroom:

We cannot mention anything about dating (heterosexual or same-sex) in Catholic or [other] Christian schools. We can only talk about friendships. There can be no encouragement of relationships or dating.

Now a supervisor, Karen realised that not all of her staff would feel comfortable discussing sexualities with young people:

When [colleagues] talk about religion, you know that means 'don't bother me'. Some will say openly, 'Ai-ya, I have this kind of religion; if you ask me to help with these cases, I cannot do it.' I don't have religious baggage, and I think I am more free, so I'm okay to take up these cases. I think it's a personal choice.

A lack of guidelines on discussing sexualities in both mainstream social service organisations and schools meant the topic is often left up to service providers for interpretation. The conservative Christian informants, whether Protestant or Catholic, often took strong positions regarding their approval or disapproval of sex and relationships amongst young people and, in interview, clearly stated their negative stance on homosexuality when questions were asked about the intersection of religion and sexuality.

For example, 29-year-old Catherine, a Christian school-based social worker with eight years' experience who identified herself as a liberal Christian and was active in leading Christian study groups at her school, discussed an incident in which a gay student had sought support from his teacher, asking questions about being young, gay and in love with a fellow Christian student. The teacher, who was herself a Christian, asked Catherine for support, and together they held a meeting with the gay student. Catherine said:

For myself and the teacher, we will go back to the Bible and talk about our stance. We [told the student that] ‘we do not accept your behaviour but that doesn’t mean we do not accept you’. I told him that ‘I understand you are going through hard times’.

Catherine also recalled another occasion when a teacher had asked her to find out whether there was a way to conduct reparative therapy on gay students. Although Catherine rejected the teacher’s request to look into the possibility of ‘healing’ homosexuality, she promised to pray with students who struggled with their same-sex desires. Although Catherine clearly understood such intervention as an expression of her personal religious beliefs, it clearly has potentially negative effects on gay students. Because Christianity is so dominant in Hong Kong’s education system, we also need to take into account the structural dimension that enables educators to regard homosexuality as morally wrong. Religious studies scholar Wong Wai Ching (2013, 342) contends that the rise of evangelical Christian activism in Hong Kong has led to ‘sustained support for the propagation of conservative moral values in schools [and] social services’ and has influenced ‘the shaping of public policy’ on sexualities.

Personal Disinclination and Religion

A personal disinclination to discuss same-sex sexualities in schools often pointed to conflicts with personal religious beliefs. Many of the participants with strong Christian beliefs preferred to work in secondary schools affiliated with religious organisations. Twenty-eight-year-old Fiona, a devout Christian and school-based social worker with more than eight years of experience, worked with LGB youth aged 13–15 who often disclosed their sexual orientation to her during counselling sessions. Being aware of her stance on LGB sexualities, I asked Fiona

how she handled the internal conflict. She replied:

I do have a religious stance that is not in agreement with same-sex orientation ... but when I see young people in church or at school, I have to pretend that [I do] not have a position.... If I tell them that I am against this thing [homosexuality], then I won't be able to do the intervention. Also, I think that young people are still exploring, so I won't assume that they are really who they say they are.

Fiona discussed her experience of working with a young gay male student who cut himself regularly and had been admitted to hospital more than once. She described him as 'a smart, bright kid who [is] articulate about his needs'. Our conversation during the interview went like this:

Fiona: He and the other boy had already thought about their future, like where they wanted to live and how they would buy a place.

Interviewer: And you mentioned that [both boys] perform well in school?

Fiona: Yes, if not university, then higher diploma [a programme prior to university] should be no problem. But when I hear about the details of his future plans and him being gay, I have personal struggles.

Interviewer: But if they were a boy and girl, you would just think they're going steady?

Fiona: Yes, they would be mature. I would encourage them. I would encourage them to study hard, to apply for public housing. Their classmates would encourage them, too. For this case, I don't know if it's a good thing or not; are they mature enough? What about his mother? His mother wanted them to break up.

Fiona's constant references to her own doubts about, and her struggle to accept, this student's sexuality suggested that her religious beliefs were a significant source of tension. Although homosexuality is no longer illegal in Hong Kong, and growing community activism and the recent coming out of a number of celebrities suggests a

more positive future for LGBT persons, problems remain. Young LGBT people lack rights and legal recognition, and there is a void when it comes to teaching about minority sexuality in the school curriculum. The conversation with Fiona showed that a young gay couple soon to graduate from secondary school is not only not given a blessing for their potential future together, but is not even considered deserving of a future. Of concern to Fiona was not so much their sexual desires, but the fact that they were *planning* for their future. In a survey of over 19,000 lesbian and gay high-school students, Darwich et al. (2012) confirmed that social support from adults within the school environment leads to less truancy, substance use and discrimination. In a study of resiliency factors amongst LGB individuals, Kwon (2013) reported that social support from school authorities, teachers and peers can effectively prevent stigmatisation. This personal and professional tension, as they themselves note, can create moral or subjective dilemmas in service provision.

In interview, Wai Wai, a 35-year-old long-term community activist with the LGBT pressure group Hong Kong Rainbow, provided her thoughts on life-planning amongst young LGBT persons:

I hope they can have planning, that is, a kind of life-planning. Life-planning is not only about studying.... I would really like to tell young people that there are many different kinds of jobs in society. Dancing can be your thing. Making shoes, doing carpentry, too. I see young people a lot, and I feel it might not have everything to do with being les (lesbian), but maybe being les makes them feel more hopeless about life.

Wai Wai's comments are indicative of the stifling environment in a city dominated by capitalist ideology, where the vagaries of the property market dictate every aspect of daily life. In other words, Hong Kong's social environment makes it very challenging for a young person to imagine alternative ways of living that are

incongruent with mainstream values such as income stability and financial success. Furthermore, a lack of protection from discrimination on the basis of sexual orientation also renders the political environment unstable for LGBT persons.

Lesbians and Gays Perceived as Susceptible to Self-Harm

One of this study's aims was to explore the perceived link between deliberate self-harm and same-sex sexualities. In the interviews, I asked open-ended questions concerning whether a young person's sexual orientation could be related to his/her decision to engage in self-harm, and whether young lesbians and gays were at greater risk of self-harming behaviour. The informants gave varying responses. Those who had dealt with cases of self-harm amongst lesbian and gay youth often identified sexual orientation as a contributing factor. Karen stated:

Yes, I feel that it is a strong trigger for self-harm. It is very clear that being *tongzhi* [puts them in] a very different [position from] their parents or the rest of society.

Another respondent, 30-year-old Fanny, a teacher who taught at a high-ranking all-girls Catholic school, suggested that feeling marginalised could lead to 'feeling less loved' and thus greater susceptibility to cutting oneself. She continued:

Those who already drink, smoke and take drugs can stay out at night! But those who are more obedient have nowhere to go, so what can they do to provoke excitement in life? They want excitement, too. Some of them get really excited when they see blood. This sensation can replace another one.

Two sub-themes can be identified in the foregoing excerpts. First of these was the idea that marginalisation amongst lesbian and gay youth can lead to lower

self-esteem and thus greater susceptibility to self-harming behaviour. Other participants echoed Karen's concern that being perceived as lesbian or gay put students at greater risk of self-harm. Second, self-cutting as a form of self-harm was seen as being associated with high-achieving young lesbians. However, they still experience the stress of being a sexual minority youth. Taking this sub-theme further, locating the hidden problem of self-cutting requires one to examine the spaces in which social conformity is most expected of young people, that is, schools and religious institutions. The configuration of bodies and regulation of desires are often imposed by governing social forces.

Similarities between Perceptions of Self-Harmers and LGB Youth

One unexpected finding in this study was the similarity between service providers' perceptions of self-harmers and LGB youth. First, the stereotype associated with young people who self-harm commonly stresses attention-seeking. Similarly, if young persons are suspected of being gay or lesbian because of their gender expression or behaviour, they are often perceived as too flamboyant or explicit about their desires. Changes in hairstyle and appearance were sometimes cited as potential transgressions in the interviews. For example, 25-year-old teacher Leoni recalled a conversation with a colleague about a female student who began sporting a new, very short, hair-cut. The colleague had said, 'Something is wrong! She has gone bad.' A change in hairstyle to a more androgynous look was deemed negative for a young girl.

Second, service providers also positioned self-harm as a form of behaviour that one could grow out of, similar to a same-sex orientation. Indicative of such perceptions was 38-year-old Kitty, a highly experienced youth centre social worker in an impoverished neighbourhood. She described the questions she would ask a young lesbian at risk of self-harming behaviour:

If she were 15 or 16 years old, then [I would ask], have you told your family [that you are a lesbian]? Have you dated boys before? When did you start to have feelings for girls that are more than feelings of friendship?

It is clear here that Kitty tends to treat the issues of self-harm and same-sex sexuality as inseparable during counselling interventions. Although Kitty expressed no religious beliefs, she still had doubts about the certainty of a young lesbian's sexual orientation.

When I asked informants whether they had received institutional support to deal with issues of same-sex sexualities and self-harm, most replied in the negative, noting in particular a lack of training and collegial support, which contributed to a lack of professional knowledge in this area. Twenty-nine-year-old teacher Betty said:

I feel that the school gives us too little training, especially on handling students with self-destructive behaviour. The counselling team is supposed to be handling these cases, but I think the school counselling team is very rigid and inflexible ... and their approach to handling these cases is usually more disciplinary than counselling. For example, many students later told me that they really regretted it [talking to the school counsellors]. Students are very smart with their perceptions. They really know which school counsellor will rat them out. Then, of course they [do not] trust them.

Another respondent, Charlie, a youth worker in a mainstream social service organisation who identified as lesbian, when asked how school authorities or school-based social workers handle cases of lesbian students who harm themselves, replied:

[Rather] than addressing the self-harming behaviour, teachers will first tell her [a lesbian student] to change herself, to go back to being a girl. They will ask

her to think clearly and [ask] her again and again, are you sure you two are not just friends?

She added that teachers will generally tell such girls that they should only consider a same-sex relationship once they have ‘grown up’. The lack of professional training for teachers reinforces the stereotype of young lesbians being able to change their sexual orientation at will, thus becoming heterosexual when they reach adulthood.

Conclusion

This paper identifies some of the environmental factors and institutional discourse surrounding the issue of young LGB sexualities. It was not uncommon for the service providers interviewed to cite personal religious beliefs as a deterrent to providing counselling and mental health services supportive of LGB youth, and secondary schools with a religious affiliation are likely to omit all discussion of sex and sexuality from the curriculum. Among service providers and professionals, lack of support services for LGB youth, compounded by stigmatised identities, was viewed as leading to a greater propensity for self-harm.

Findings from this study point to the need for education for service providers on LGB sexualities. Regardless of their religious affiliation, educational institutions in Hong Kong need to engage more fully with sexual diversity in their school policies on bullying and harassment. There is some suggestion among local community activists that as the result of failure to address these concerns substance abuse is becoming an increasingly common issue, particularly amongst lesbians and bisexual women. This is deserving of attention in future research, as is broader investigation of the issues of relevance to transgender youth. Finally, research on cyber-bullying and the use of social media will enable a better understanding of the stresses and issues faced by

LGB youth in Hong Kong.

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ⁱ The Hong Kong Education Bureau website contains a list of sex education resources in the section entitled Moral, Civic and National Education in Curriculum Development:
<http://www.edb.gov.hk/en/curriculum-development/4-key-tasks/moral-civic/sex-education.html#2>. The list does not mention sexual orientation as an issue for discussion, but LGB issues are included in the examples for discussion.